

|  |                               |                |
|--|-------------------------------|----------------|
| <b>REVOCATION OF POWER<br/>OF ATTORNEY WITH<br/>NEW POWER OF ATTORNEY<br/>AND CHANGE OF<br/>CORRESPONDENCE ADDRESS</b> | <b>Application Number</b>     | 10/634,874     |
|  | <b>Filing Date</b>            | August 6, 2003 |
|  | <b>First Named Inventor</b>   | Babak Habibi   |
|  | <b>Art Unit</b>               | 3864           |
|  | <b>Examiner Name</b>          | McDieuel Marc  |
|  | <b>Attorney Docket Number</b> | 170154.401C1   |

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

**OR**

I hereby appoint the practitioners at Seed IP Law Group PLLC, Customer Number: **00500**

Please change the correspondence address for the above-identified application to:

The address associated with Customer Number **00500**

**OR**

|   |       |     |  |
|---|-------|-----|--|
| <input type="checkbox"/> Firm or<br>Individual Name |       |     |  |
| Address   |       |     |  |
| City  | State | Zip |  |
| Country   |       |     |  |
| Telephone   | Email |     |  |

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

As assignee of record of the entire interest I/we hereby elect, under 37 CFR 3.71,  
to prosecute the application to the exclusion of the inventor(s).

**SIGNATURE of Applicant or Assignee of Record**

|                                    |   |      |           |
|------------------------------------|---|------|-----------|
| Signature                          |  | Date | September |
| Name                               | Rick Weidinger  |      |           |
| Title and<br>Company<br>(Assignee) | Manager<br>RoboticVisionTech LLC  |      |           |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.  
Submit multiple forms if more than one signature is required, see below\*.

\*Total of \_\_\_\_\_ forms are submitted.